

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Danny Bowens

Write the full name of each plaintiff.

19 CV 01460

(Include case number if one has been assigned)

-against-
Hewlett Packard Enterprise
Russell W. Nolan

COMPLAINT

Do you want a jury trial?
 Yes No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

S.D. OF N.Y.

2019 FEB 15 PM 2:25
U.S. DISTRICT COURT
FILED

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

Federal Question
 Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

Title VII of the Civil Rights Act of 1964
The Genetic Information Nondiscrimination Act or
The Age Discrimination in Employment Act - Employee
terminated due to age and years of service on job

B. If you checked Diversity of Citizenship

1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, _____, is a citizen of the State of
(Plaintiff's name)

_____.
(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____.

If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, _____, is a citizen of the State of
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____.

If the defendant is a corporation:

The defendant, Hewlett Packard Enterprise, is incorporated under the laws of
the State of Texas

and has its principal place of business in the State of New York

or is incorporated under the laws of (foreign state) _____
and has its principal place of business in Texas.

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

Danny

First Name

W.

Middle Initial

Bowens

Last Name

875 Pearcy Island Avenue 3H

Street Address

Bronx

County, City

NY

State

10207

Zip Code

917-833-6551

Telephone Number

Danny.bowens@yahoo.com

Email Address (if available)

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

First Name	Last Name
Russell	Nolan
Current Job Title (or other identifying information)	
District Service Manager	
Current Work Address (or other address where defendant may be served)	
556 W 22nd Street	
County, City	State
New York	NY
	Zip Code
	10011

Defendant 2:

First Name	Last Name
Current Job Title (or other identifying information)	
Current Work Address (or other address where defendant may be served)	
County, City	State
	Zip Code

Defendant 3:

First Name	Last Name
Current Job Title (or other identifying information)	
Current Work Address (or other address where defendant may be served)	
County, City	State
	Zip Code

Defendant 4:

First Name	Last Name	
Current Job Title (or other identifying information)		
Current Work Address (or other address where defendant may be served)		
County, City	State	Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence: New York, NY

Date(s) of occurrence: 11/16

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

Violations of Title VII of the Civil Rights Act of 1964. Race and Age violations for dismissal of employment. Act of retaliation by manager Russell Nolan for comments Bowens left in yearly performance evaluation report. Bowens has been a very high rated performer. Hewlett Packard Enterprise has lay offs based on total number of years of service and current age. My years of service was 35 years and current age was 54 years old, which equates to 89. Hewlett Packard Enterprise has laid off personnel with a total of 80 points, with age and years of service combined.

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

Lost of wages, no health insurance,
no dental insurance, no vision insurance
lost the ability to provide for my family,
Insomnia, lack of sleep and lost of good
health

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

Seeking back pay from moment of termination
without just cause. Mental stress,

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

2-15-19

Dated

Danny

First Name

875 Pennsylvania AVE

Middle Initial

M

Plaintiff's Signature

Danny Bowens

Last Name

3H

Street Address

Brooklyn

NY

11207

County, City

917-833-6551

State

NY

Zip Code

Telephone Number

Email Address (if available)

Danny.bowens@yahoo.com

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

Yes No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.